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Bib Data Sheet

CONFIRMATION NO. 9190

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|-----------------------------|-----------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER 10/769,900 | FILING DATE 02/03/2004 RULE | CLASS 327 | GROUP ART UNIT 2816 | ATTORNEY DOCKET NO. 58268.00349 |
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APPLICANTS

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** CONTINUING DATA *****

None *[Signature]*

** FOREIGN APPLICATIONS *****

None *[Signature]*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/30/2004

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|---------------------------------|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 3 | TOTAL CLAIMS 17 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | | |

ADDRESS

32294
SQUIRE, SANDERS & DEMPSEY L.L.P.
14TH FLOOR
8000 TOWERS CRESCENT
TYSONS CORNER, VA
22182

TITLE

Transmitter IF section and method enabling IF output signal amplitude that is less sensitive to process, voltage, and temperature

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| FILING FEE RECEIVED 770 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit |
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